



Ballona Wetlands Plant and Wildlife Observation Form



Date: / / Time: : am / pm

Scientific Name:

Common Name:

Map Grid Location:

Total Number of Individuals:

Photograph?: Y / N (please provide with form)

Reporter:

Email:

Phone:

Plant Information

Alive / Dead

Flowering: Y / N

Fruiting: Y / N

Wildlife Information

Adults: _____

Juveniles: _____

Larvae: _____

Eggs: _____

Breeding: Y / N

Wintering: Y / N

Burrow Site: Y / N

Nesting: Y / N

Location Description:

Area: A / B / C

Source of Coordinates? (GPS, Map):

GPS make/model:

Horizontal Accuracy: _____ feet / meters

Datum: NAD27 / NAD83 / WGS84

Coordinate System: UTM Zone 10 / UTM Zone 11 / Geographic

Easting/Longitude:

Northing/Latitude:

Habitat Description (plant communities, dominants, associates, substrates/soils, aspects/slope):

Overall Site Quality: ☐ excellent ☐ good ☐ fair ☐ poor

Visual Disturbances:

Threats:

Determination (check one or more and fill in blanks)

☐ Keyed (cite reference):

☐ Compared with specimen housed at:

☐ Compared with photo/drawing in:

☐ By another person:

☐ Other:

Additional Notes:

Send completed forms to Sean Bergquist at sbergquist@waterboards.ca.gov
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